

Rx News Bulletin

Bureau of Narcotics & Dangerous Drugs

Missouri Department of Health and Senior Services

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Pharmacists as Gatekeepers Against Fraud and Abuse

Free Training in April 2014

Federal Regulation 21 CFR 1306.04(a) sets forth the requirements for controlled substance prescriptions. There is one set of requirements for the prescriber who has the primary responsibility. A second set of requirements is for pharmacies which have a secondary and corresponding liability. The DEA and recent case law have determined that pharmacists play a crucial role in preventing the diversion of controlled substances by declining to fill suspicious prescriptions.

Some pharmacies have faced regulatory discipline, fines and in some cases criminal charges. Federal Regulation 21 CFR 1301.71(a) and Missouri Regulation 19 CSR 30-1.031(1) state that all registrants shall provide adequate controls to guard against the diversion of controlled substances. Enforcement agencies are not only taking action against questionable prescribers but they are also following up by reviewing the actions of the dispensing pharmacies.

The following are examples of situations pharmacies should consider prior to dispensing questionable prescriptions:

- Although a professionally licensed pharmacist may not want to dispense a prescription, they have received strict instructions from their corporate office to fill everything and not turn any prescriptions away;
- Multiple customers receiving the same repeated combinations of prescriptions from a prescriber;
- Customers lining up to pay cash for these prescriptions;
- Customers traveling long distances to visit a physician for a prescription and/or to fill a prescription; (BNDD has several instances of patients driving from Ohio to Florida to get a prescription and then driving to north central Missouri to get them filled)

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- Customers arriving in carpools and groups, each with the same prescriptions from the same physician;
- Excessive prescriptions for opiates from physicians who are not pain management specialists;
- Customers have been identified as “doctor shoppers” but their prescriptions are not declined.
- The amount of drug purchasing and dispensing is not proportional to the area’s population.

Pharmacists have shared that they feel caught in the middle. The prescription presented appears legal on its face and they do not have a valid reason to decline it. They are pressured by the patients and the physicians while at the same time influenced by their pharmacy owners and regulatory authorities.

To assist with this situation and provide more detailed instruction, the DEA is hosting a free training for pharmacy staff on April 5th and 6th, 2014 at the Hilton St. Louis at the Ballpark, 1 Broadway Street, St. Louis.

The DEA has been hosting Prescription Drug Abuse Conferences (PDAC) around the country. Pharmacists, technicians and loss prevention staff may visit the DEA website at www.deadiversion.usdoj.gov/mtgs/pharm_awareness/index.html. You may enroll by entering your pharmacy DEA number. The registration and conference are free but attendees are responsible for their own transportation, lodging, and meals.



CVS Caremark Stops Dispensing for Excessive Prescribers

In recent news, CVS Caremark announced that their pharmacies will stop dispensing opiate prescriptions to physicians they have classified as excessive prescribers. Upon reviewing all prescribing data, the questionable prescriptions were identified on the basis of patients paying with cash, opiate prescriptions for younger patients, patients driving long distances to fill prescriptions, and certain practitioners who stood out as prescribing up to 20 to 50 times as much pain medication as the other average prescribers in the same geographic area.

“CVS Stops Filling Painkiller Prescriptions by Outlier Doctors,” CommonHealth post August 21, 2013, by Martha Bebinger.

BNDD, Local Law Enforcement, Treatment Providers Team Up

During the first week of November 2013, area Safety and Health Councils in St. Joseph, Kansas City and Springfield hosted full day seminars relating to Prescription Monitoring Programs. Presentations were made by the Bureau of Narcotics and Dangerous Drugs, local law enforcement, treatment providers and a representative from a national organization for state drug laws.

A taped presentation was recorded for the safety councils by Gil Kerlikowske, Director of the White House’s Office of the National Drug Control Policy. The seminars were attended by local physicians, pharmacy staff, employers, drug treatment providers, law enforcement and members of the Missouri General Assembly.

BNDD Staff Attend National Training Conferences

The Bureau of Narcotics and Dangerous Drugs staff are members of both the National Association of State Controlled Substance Authorities (NASCSA) and also the National Association of Drug Diversion Investigators. (NADDI)

Both national organizations had their annual training conferences in Missouri this year and the bureau was able to attend each. Staff received training and updates on new laws and regulations, drug abuse and diversion trends, preventing prescription fraud, prescribing for pain management and also prescription monitoring programs.



Drug Take Back Results

Date	Tons of Medication Collected
September 2010	121
April 2011	188
October 2011	189
April 2012	276
September 2012	244
April 2013	371
November 2013	324

* April 2013 – Missouri had 153 agencies collect 28,341 pounds

November 2013 – Missouri had 134 agencies collect 19,901 pounds.

Missouri Department of Health and Senior Services, Bureau of Narcotics and Dangerous Drugs, 3418 Knipp Drive,
PO Box 570, Jefferson City, MO 65102; (573) 751-6321; (573) 751-2569 fax; bndd@health.mo.gov;
health.mo.gov/safety/bndd/index.php

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